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CONFIRMATION NO. 4408

SERIAL NUMBER 10/802,996	FILING DATE 03/17/2004 RULE	CLASS 800	GROUP ART UNIT 1632	ATTORNEY DOCKET NO. RFSUNY-3673 R1410
<b>APPLICANTS</b>  Michael M. Meguid, East Syracuse, NY;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/457,213 03/24/2003 <i>JH</i>				
<b>** FOREIGN APPLICATIONS *****</b>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 05/31/2004				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>JH</i>	STATE OR COUNTRY NY	SHEETS DRAWING 7	TOTAL CLAIMS 23
Verified and Acknowledged Examiner's Signature <i>JH</i>	Initials <i>JH</i>	INDEPENDENT CLAIMS 3		
<b>ADDRESS</b> Sander Rabin Sander Rabin MD JD & Associates 2 Irving Place Troy , NY 12180-4417				
<b>TITLE</b> Animal with surgically modified gastrointestinal tract and method for study of weight reduction				
FILING FEE RECEIVED 412	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____		